

2369

...in case of more than one child at a birth, a SEPARATE RETURN must be made for each, giving number of each, in order of birth, stated. This certificate must be filed by the attending Physician or Midwife with each local Registrar within 5 days after birth.

PLACE OF BIRTH

County of Yuma
 District of Yuma
 Town of Yuma
 or Yuma
 City of Yuma

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

State Index No. 113

ORIGINAL CERTIFICATE OF BIRTH.

Co. Register No. 147

Local Registrar's No. _____

(No. _____ St; _____ Ward)

FULL NAME OF CHILD Louise Garcia

Born YES
 Alive NO

If child is not named, make Supplemental Report on blank obtainable from local registrar.

Sex of Child Female Twin. ☒ Triplet ☐ or other ☐ and ☐ Number in order of birth 1 Legitimate? Yes Date of Birth June 29 1913
 (Month) (Day) (Yr.)

Full Name Charles Garcia FATHER
 Residence Bone Rd

Color or Race Mexican Age at last Birthday 22 (Years)

Birthplace Florence Arizona

Occupation Jeannette

Full Maiden Name Josephine Carrazosa MOTHER
 Residence Idaho

Color or Race Mex. Age at last Birthday 19 (Years)

Birthplace Globe, Ariz

Occupation Housewife

Number of child of this mother 2 Number of children, of this mother, now living 2 Were precautions taken against Ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on June 29 1913, at 69 M.

*When there is no attending physician or midwife, then the householder should make this return.

(Signature) C. J. [Signature]

(Attending physician, midwife, householder.)*

Given or christian name added from a

Address Globe, Ariz

supplemental report _____ 191__

Filed July 4 1913

LOCAL REGISTRAR

Filed July 5 1913

A True Copy

COUNTY REGISTRAR

371-629-131
COUNTY REGISTRAR.